



## **BOAT PUMPOUT GRANT APPLICATION**

## Maine Department of Environmental Protection Attention Pamela Parker, 17 SHS Augusta, ME 04333-0017

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1.	LOCATION (Town)
2.	WATERBODY SERVED (Harbor)
3.	FACILITY NAME
4.	ESTIMATE OF BOATS SERVED: RESIDENT TRANSIENT
5.	FEDERAL ID NUMBER or for an individual SSN
6.	PHYSICAL LOCATION (street address)
7.	FACILITY OPERATOR
8.	MAILING ADDRESS
9.	TEL NUMBERCONTACT PERSON
10.	GRANT REQUEST (75% of eligible costs): EQUIPMENT \$O&M* \$
11.	DATE OF SYSTEM INSTALLATION
12.	ARE LOCAL OR STATE PERMITS REQUIRED FOR THIS INSTALLATION?** Y/N

12.	PROJECT DESCRIPTION:
	a) Type of system (stationary, caddy)
	b) Type of pump (diaphragm, vacuum, peristaltic)
	c) Manufacturer and vendor of the system
	d) Waste receptacle (holding tank, sewer connection)
	e) Operation plan for the facility (self serve, marina operated, hours of operation, any restrictions)
	ning below, I certify that the information contained in this application is accurate and that I will abide standard conditions for the Maine Pumpout Grant Program.
Signe	dOwner/operator
ARE `	YOU INTERESTED IN A FLAG TO ADVERTISE YOUR PUMPOUT STATION? Y / N
ARE `	YOU INTERESTED IN DECALS FOR YOUR PUMPOUT STATION? Y/N
ARE `	YOU INTERESTED IN DISTRIBUTING INFORMATION PACKAGES TO BOATERS? Y / N
	LD YOU LIKE TO PROVIDE THE DEP WITH INFORMATION AND/OR COUPONS TO BE
	UDED IN OUR INFORMATION PACKAGES FOR BOATERS? Y/N

Additional record keeping is required to receive operations and maintenance grant money. Operation and maintenance money may only be available until 2004. See Guidelines

\*\* Please see supplemental materials for permit required activities

DEPI